Bylaws

of the

Wyoming Comprehensive Care and Prevention Planning Alliance

Revised May 19, 2013



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BYLAWS OF THE WYOMING COMPREHENSIVE CARE AND PREVENTION PLANNING ALLIANCE

ARTICLE ONE - NAME AND HEADQUARTERS

The name shall be the Wyoming Comprehensive Care and Prevention Planning Alliance, hereinafter referred to as CAPPA. For the purposes of maintenance of records and coordination of activities, the headquarters office shall be located in the Communicable Disease Unit of the Wyoming Department of Health, hereinafter referred to as "the Department," in Cheyenne, Wyoming, or at some other location as might be determined from time to time by the Department.

<u>ARTICLE TWO – PURPOSE AND MISSION</u>

The Wyoming Comprehensive Care And Prevention Planning Alliance exists as a core component of both HIV prevention programming, as required by the Centers for Disease Control and Prevention, and HIV care and treatment public advisory planning for the Ryan White Programs and AIDS Drug Assistance Program (ADAP) as required by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services, and incorporates sexually transmitted infection (STI) risk behaviors as a component of disease infection.

The mission of the Wyoming Comprehensive Care and Prevention
Planning Alliance is to develop, evaluate, and modify a
Comprehensive Plan that effectively addresses the care and
prevention needs of high-risk populations as well as individuals living
with or affected by HIV, AIDS, Hepatitis and Sexually Transmitted
Infections in Wyoming.

ARTICLE THREE - ROLES AND RESPONSIBILITIES

Each member of CAPPA has a specific role in the public advisory and planning process. There are specific roles and responsibilities that the Department and CAPPA are each expected to perform in implementing the planning process. In addition, there are shared responsibilities between the health department and CAPPA.

Section 1: Health Department The Wyoming Department of Health is responsible for supporting the care and prevention planning process (via funding, staff, consultant/contractor resources, and leadership). The Department's roles are to:

1. Create and maintain at least one planning group that meets the goals and objectives and operating principles of the CDC and HRSA.

In addition, it is the Department's responsibility to support planning activities, including:

- Supporting meeting logistics (CAPPA, public, and other input-focused meetings).
- Supporting member involvement (such as transportation, expense reimbursement, etc.), especially for persons living with or at risk for HIV infection.
- Supporting the infrastructure of the HIV prevention and care planning process (such as staff, consultants, contracts, etc.).
- 2. Appoint the Health Department Co-Chair.
- 3. Ensure collaboration between community planning and other relevant planning processes in the State of Wyoming such as the various Ryan White CARE Act programs, the AIDS Education and Training Center, and STI prevention.

- 4. Develop the epidemiologic profile and conduct the community services assessment. Because the Department has a responsibility to inform the public about emerging public health trends, including HIV/AIDS, Hepatitis, STIs and other related health issues, it is responsible for developing both of these products. However, the Department will discuss each of the products with CAPPA and agree on the approach that will be used to develop the epidemiologic profile (e.g., types of data desired, format, etc.) and the community services assessment (e.g., types of data to be collected, the methodologies to be used, format, etc.)
- 5. Provide CAPPA with information on other federal/state/local public health services for high-risk populations identified in the Comprehensive Plan.
- 6. Assure that CAPPA has access to current information (including relevant budget information) related to prevention and care, including appropriate analysis of the information and potential implications for HIV, Hepatitis and STI prevention and care activities in the State of Wyoming. Sources of information may include evaluations of program activities, local program experience, programmatic research, best practices, and other sources, especially as the information relates to at-risk population groups within a given community and the priority needs identified in the Comprehensive Plan.
- 7. Develop an application to the CDC for federal HIV prevention cooperative agreement funds based on the Comprehensive Plan developed through the planning process.
 - Present the funding application and budget to CAPPA with adequate time for members to review and issue a written response.

- Demonstrate that the planning process has met the goals and objectives of community planning as outlined by the current CDC guidance.
- 8. Develop an application to HRSA for federal HIV care grants based on the Comprehensive Plan developed through the planning process.
 - Present the funding application and budget to CAPPA with adequate time for members to review and issue a written response.
 - Demonstrate that the planning process has met the goals and objectives of public advisory planning as outlined by the current HRSA guidance.
- Allocate, administer and coordinate all public funds (including state, federal, and local) to prevent HIV transmission and reduce HIVassociated morbidity and mortality.
 - Award HIV prevention funds to implement the HIV prevention services stated in the Comprehensive Plan and health department application.
 - Monitor contractor (service provider) activities and document contractor compliance.
- 10. Provide regular updates to CAPPA on the various successes and barriers encountered in implementing the services described in the Comprehensive Plan.
- 11. Report progress and accomplishments regularly to the CDC and HRSA.

Section 2: CAPPA The Wyoming Comprehensive Care and Prevention Planning Alliance is responsible for developing a Comprehensive Plan and reviewing the health department's applications for federal HIV prevention and care funding for concurrence with the Plan. CAPPA does not allocate resources.

The role of CAPPA is to:

- 1. Elect the Community Co-Chairs, who will work with the Department designated Co-Chair.
- Review and use key data to establish prevention priorities. CAPPA shall
 review all existing and new products (i.e., epidemiologic profile, community
 services assessment, prioritized target populations, selected set of
 prevention activities/interventions, and the Comprehensive Plan) prior to
 decision making.
- 3. **Develop a Comprehensive Plan.**
 - The emphasis of CAPPA is on developing a Comprehensive Plan that includes priority target populations as well as prevention and care activities/interventions. Target populations are prioritized and prevention activities/interventions chosen based on their ability to prevent as many new infections as possible.
 - The Department and CAPPA, together, shall determine if CAPPA will take the responsibility for doing more than planning-related and public advisory activities.
- 4. Collaborate with the Department in reviewing and finalizing key community planning activities. These activities include the epidemiologic profile, the community services assessment, prioritized target populations, prevention and care activities/interventions, and the Comprehensive Plan.
- 5. Review the Department's applications to CDC and HRSA for federal funds, including the proposed budgets, and develop a written response that describes to what degree the Department's applications do or do not agree with the priorities set forth in the Comprehensive Plan.

Section 3: Shared Responsibilities Together, the Department and CAPPA share the responsibilities for:

- 1. **Process Management:** Developing procedures and policies that address membership, roles, and decision making. This specifically includes:
 - The composition of CAPPA; selection, appointment, and duration of terms to ensure that the membership reflects, to the extent possible, the epidemic in the State of Wyoming (i.e., age, race/ethnicity, gender, sexual orientation, geographic distribution, risk for HIV/Hepatitis/STI infection, etc.);
 - The roles and responsibilities of CAPPA, its members, and its various components (i.e., standing committees, work groups, task forces, etc.);
 - The process to identify potential conflicts of interest and methods for resolution of conflicts of interest for CAPPA members;
 - The methods for reaching decisions; attendance at meetings; and resolution of disputes identified in deliberations.
- Membership Selection: Develop and apply criteria for selecting CAPPA
 members. Special emphasis shall be placed on procedures for identifying
 representatives of at-risk, affected, and socioeconomically marginalized
 groups that are underserved by existing programs.
- Input Mechanisms: Determine the most effective input mechanisms for the planning process, including seeking input and guidance from persons who are not members of CAPPA.
- 4. **Planning Funds:** Provide input on the use of funds targeted to the planning process.
 - Support CAPPA meetings, public meetings, and other means for obtaining community input;

- Facilitate the involvement of all participants in the planning process, particularly those persons with and at risk for HIV/Hepatitis/STI infection;
- Support capacity development for inclusion, representation, and parity
 of community representatives and for other CAPPA members to
 participate effectively in the process;
- Provide technical assistance to local health departments and community planning groups by outside experts;
- Assure representation of CAPPA (governmental and nongovernmental) at necessary regional or national meetings relevant to the work of the Wyoming Comprehensive Care and Prevention Planning Alliance;
- Collect, analyze, and disseminate relevant data; and
- Monitor and evaluate the planning process.
- 5. **Provide a thorough orientation for all new members.** The Membership Committee shall provide all new members an orientation that provides basic information on CAPPA and the planning process, including:
 - Goals and Core Objectives, roles, responsibilities, and principles;
 - Procedures and ground rules used in deliberations and decision making;
 - Specific policies and procedures for resolving disputes and avoiding conflicts of interest.
- 6. Evaluate the community planning process to assure that it is meeting the core objectives of community planning.

ARTICLE FOUR - MEMBERSHIP

Section 1: Number and Composition

The Wyoming Comprehensive Care and Prevention Planning Alliance will consist of not more than twenty-eight (28) members, as follows: three (3) leadership members, five (5) regional members, ten (10) technical assistance members, and ten (10) population

members.

Leadership Members (3 total)

One (1) member shall serve as the Wyoming Department of Health Co-Chair. The Health Department Co-Chair shall be appointed by and serve at the direction of the Communicable Disease Unit Chief of the Wyoming Department of Health, and shall serve

ex-officio with no term limit.

Two (2) members shall be elected by CAPPA, and each shall serve a two year term as a Community Co-Chair. One (1) of these two (2) Co-Chairs shall be an individual living with HIV or AIDS. At least one (1) of the two (2) elected Co-Chairs shall serve on the Comprehensive Plan and Evaluation Committee. The terms of the Community Co-Chairs shall be staggered such that only one (1) of the two (2) expires each year.

The three (3) leadership members, together with two (2) additional members elected *at large* from the balance of CAPPA members, shall comprise the Executive Committee.

Regional Members (5 total)

One (1) individual from each of the five geographic regions shall be elected to serve a twoyear term on CAPPA. A regional member must feel able and competent to present the community values and norms of their region, must reside within the region they wish to represent, and must be able to provide expertise on the care and prevention needs specific to their geographic area of Wyoming.

Technical Assistance Members (10 total)

One (1) individual from each of the following ten (10) categories shall be elected to serve a two-year term. The member must possess significant expertise in the field they represent.

- Behavioral Science / Mental Health
- Clergy / Faith-based Organizations
- Community-Based Nursing / Public Health Nursing
- Law Enforcement / Corrections / Criminal Justice
- Sexually Transmitted Infections (STI)
- Ryan White Part C Early Intervention Services
- Ryan White and/or HOPWA Case Management
- Substance Abuse / Chemical Dependency
- Title X Family Planning Clinics
- Wyoming Department of Education

Population Members (10 total)

Ten (10) individuals shall be elected to serve a two-year term representing specified populations. The specific populations to be represented on CAPPA shall be determined, from time to time as needed, by the Department and the Executive Committee of CAPPA, and shall reflect the needs of persons living with HIV/AIDS and/or Hepatitis, as well as individuals representative of populations deemed to be at increased risk for HIV/AIDS, Hepatitis and STIs.

No less than five (5) of the ten (10) population members shall be individuals living with HIV/AIDS.

It is recognized that the involvement of persons living with HIV/AIDS/Hepatitis, persons of color, persons with disabilities, and other marginalized populations are critical to effective care and prevention planning in Wyoming. Because each of these population members is

elected to CAPPA as a representative of a specific group of people, an individual wishing to fill one of these positions must be willing to disclose, as appropriate, that they are representative of that specific population. Any and all personal disclosures made within meetings of CAPPA and/or in conjunction with conducting the business of CAPPA are strictly confidential and shall not be further disclosed.

Section 2: Application, Election, and Removal

Any person interested in becoming a voting member of CAPPA shall complete the official application form and return it to the Wyoming Department of Health. The Membership Committee shall review each application, determine the appropriateness of the applicant to fill existing vacancies in CAPPA membership, and may assign a cumulative score to the application based on the confidential scoring process approved by the Executive Committee. Actual scores assigned to applicants shall not be disclosed outside of the Membership Committee discussions, and shall not be annotated or otherwise marked on the application, or provided to the applicant or the general membership of CAPPA. The Membership Committee shall appoint appropriate candidates to fill vacant positions on CAPPA. All terms in office shall begin at the meeting immediately following the meeting during which the Membership Committee appoints the applicant.

Removal from CAPPA may result when: 1) a member misses two regularly scheduled meetings within a calendar year without having been previously excused by the Executive Committee; 2) there is an undisclosed conflict of interest in violation of Section 3 below; and/or 3) there is good cause. Good cause is defined as, but is not limited to: 1) the member living outside of their geographically represented area; 2) the member not fulfilling the responsibilities of membership; 3) a vote of no confidence being brought before the Executive Committee; and/or 4) any other issues which are brought before CAPPA on a case-by-case basis. All removals must pass by a 2/3 majority of the entire voting membership of CAPPA present at the regularly scheduled meeting. All removals will be reviewed by the Membership Committee, and then recommended to the entire voting membership of CAPPA present at the regularly scheduled meeting for removal. Removal

from CAPPA will become effective immediately upon consensus of CAPPA voting members. A member who has been removed from CAPPA may choose to appeal according to the grievance procedure outlined in Article 4, Section 4: Conflict Resolution and Grievance Procedures.

Zero Tolerance Policy: If a CAPPA member threatens violence, either actual or perceived, of a physical or verbal nature, their membership will be terminated immediately.

All written correspondence of CAPPA concerning application, election, and removal of members shall be the responsibility of the Department Co-Chair.

Section 3: Conflict of Interest

In conducting all business, CAPPA shall act in accordance with all local, state, and federal laws pertaining to conflicts of interest. In order to safeguard the recommendations of CAPPA to the Department from potential conflicts of interest, each member shall be required to disclose in writing any and all involvements and affiliations with agencies that may pursue funding from the Department, the Department's agents, or from other agents as might be affected by the recommendations of CAPPA. All membership documentation shall be completed by each voting member at the commencement of his or her term in office, and prior to any participation of the member in discussion, debate, or vote regarding any business before CAPPA. All membership documentation will be kept on file with the Department. A review of the conflict of interest policy and procedures shall be conducted during at least one regularly scheduled meeting of CAPPA in each calendar year. Potential conflicts of interest will be reviewed on a case-by-case basis by the Executive Committee at the request of any voting member of CAPPA.

A conflict of interest occurs when a voting member of CAPPA knowingly takes action or makes a statement intended to influence the conduct of CAPPA in such a way as to confer any financial benefit on the member, family member(s), or on any organization in which the member is an employee, volunteer, agent, Director, Board member, has a significant interest, or otherwise materially benefits from association with the agency.

For any business that might come before CAPPA, each member should have no agency affiliation or interest that would compromise or have undue influence regarding the member's objectivity regarding assessments of resources, examinations of needs, prioritization of needs, and evaluation of activities. Undue influence may be defined by the creation of criteria that directly or indirectly cause the allocation of services, funds, or resources toward one person or agency when equally qualified persons or agencies are available.

All actual or potential conflicts of interest will be addressed in the following manner:

- Any member, upon recognizing a potential conflict of interest, may request a
 review of the conflict by the Executive Committee, and should voluntarily
 excuse him/herself from all discussion, debate, or vote for which a potential
 conflict of interest exists until such time as the review of the conflict is
 completed.
- 2. Any member, upon recognizing an actual conflict of interest, may voluntarily excuse him/herself from all discussion, debate, or vote for which a conflict of interest exists.
- 3. Any member, upon suspicion of a potential conflict of interest by another member, should first approach said member regarding the concerns. Such approaches should be presented and interpreted by all members as a concern for the integrity of the process as a whole, and not as a personal or professional attack on the member. If a conflict of interest is identified, the member with the conflict of interest will voluntarily excuse him/herself from all discussion, debate, or vote for which the conflict exists.

- 4. In the event that a concern about a potential conflict of interest has been presented to the member involved, and a successful resolution cannot be reached, any voting member may initiate a review of the potential conflict of interest by the Executive Committee. The member for whom the potential conflict of interest exists may not participate in any discussion, debate, or vote on the area of potential conflict until the review is completed. If a conflict of interest is identified by the Executive Committee, the member will voluntarily excuse him/herself from all discussions, debate, or vote for which the conflict exists.
- 5. Failure to excuse oneself from any and all business relating to an identified conflict of interest may result in the removal of the member, as outlined in Article 4, Section 2, above.

Section 4: Conflict Resolution and Grievance Procedures

All members shall attempt to resolve a conflict by communicating directly with the other member(s) involved. If direct communication between the parties does not resolve the conflict, then either or all of the persons involved may contact a member of the Executive Committee to discuss the issue. If the Executive Committee is unable to successfully mediate a resolution, any or all of the parties involved may file a formal grievance.

The grievance procedure is intended to be a formal mechanism utilized when all other matters of resolution have been unsuccessful. The individual filing a grievance must do so in writing, and must elaborate the concerns involved, and all attempts to reconcile the concerns.

After the grievance is put in writing, it shall be submitted to the Executive Committee. The Executive Committee will appoint three voting members of CAPPA to serve on the Resolution Team, which shall be led by the Unit Chief of the Communicable Disease Unit of the Wyoming Department of Health. Those persons appointed must not be involved in any way with the grievance, and must not be a member of the Executive Committee. The

4-person Resolution Team will review the situation thoroughly, and will respond in writing within 30 days to the Executive Committee and to the persons involved in the grievance.

Section 5: Vacancies

Vacancies on CAPPA will be filled as needed according to the procedures set forth in Section 2 above.

Section 6: Co-Chairs

The Wyoming Department of Health's Communicable Disease Unit Chief selects a health department employee, or designated representative, as the Department Co-Chair, and CAPPA membership elects two (2) members to serve as the Community Co-Chairs, one (1) of which is required to be a person living with HIV/AIDS. No employee of the Wyoming Department of Health's Communicable Disease Unit may serve as a Community Co-Chair. All three (3) Co-Chairs share responsibility for guiding CAPPA in accomplishing its mission and goals.

ARTICLE FIVE - GOVERNANCE OF MEETINGS

All business that will come before CAPPA will be addressed with an open, consensus building decision process. Should consensus building activities fail to facilitate the effective conduct of any business at hand, CAPPA shall conduct the meeting, or any portion thereof, according to the procedures established in *Robert's Rules of Order, Newly Revised.*

CAPPA values the professional conduct of all members, staff, and guests. No member of the public, nor any voting member of CAPPA, its committees and task forces, may be willfully disruptive. Any person or group of persons who willfully disrupt the meeting so as to render the orderly conduct of the meeting unfeasible will be removed from the meeting

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venue, and will not be readmitted for the duration of the meeting. The Executive

Committee will be responsible for removing a willfully disruptive person or group of

persons.

Section 1: Schedule of Meetings

CAPPA shall meet at least quarterly to conduct regular business. Should there be no

business to conduct, or in the event of unforeseen circumstances, the Co-Chairs may

postpone or cancel a scheduled meeting with the advance approval of the Department.

Section 2: Meeting Venues

All meeting locations, dates, and venues shall be arranged by the Department with input

from CAPPA.

Section 3: Attendance

Attendance at all regularly scheduled meetings will be recorded by a person or persons

designated for the purpose by the Department. Voting members are required to attend all

meetings. If unable to attend, a member shall contact the Wyoming Department of Health

Co-Chair prior to any regularly scheduled meeting to excuse the member from attendance.

Exceptions will be granted for extenuating circumstances. A voting member who misses

two (2) regularly scheduled meetings, without prior notification to the Wyoming Department

of Health, within one calendar year shall be removed. Presence and participation in at

least 2/3 of the scheduled meeting times and activities will be required for a member to be

counted as present.

Section 4: Agenda

Each meeting agenda will be drafted by the Executive Committee and sent out to the membership prior to the meeting.

Section 5: Open Meetings

Pursuant to Wyoming Statutes 16-4-401 through 16-4-407, inclusive, all meetings of CAPPA are public meetings, open to the public at all times, except as otherwise provided by statute. A member of the public is not required as a condition of attendance at any meeting to register his or her name, supply information, complete a questionnaire, or fulfill any other condition precedent to his or her attendance.

It is the policy of CAPPA to allow designated time at each meeting, as appropriate, for public comment and input. A member of the public seeking recognition for comment at CAPPA meetings will be required to state his or her name and affiliation.

Members of the public and persons who are not voting members of CAPPA or one of its task forces are not eligible for travel expense reimbursement unless previously requested, in writing, to the Executive Committee. All written requests must be submitted at least three (3) weeks in advance of the meeting to be considered. Any such request will be subject to approval by the Executive Committee, whose decision will be final. Examples of legitimate requests may include, but are not necessarily limited to: invited guest speakers, persons who wish to provide expertise on a specific topic, and/or persons who have applied to, or expressed a sincere interest in becoming a voting member of CAPPA.

Section 6: Decision Making

All decisions of CAPPA shall be based on consensus building. Under the consensus style, members arrive at a shared decision, requiring all parties involved in the process to support the final decision. Should the members fail to reach consensus within a reasonable amount of time, as determined by the Co-Chairs, the Co-Chairs shall call for a vote. In the

event a vote is called for, the rules applicable to a quorum will be followed as outlined in Section 9 below.

Section 7: Emergency Meetings

Meetings to address urgent business may be called as needed by the Co-Chairs with the approval of the Department. At the discretion of the Co-Chairs, urgent business may be conducted through: 1) audio or video conferencing with available members; or 2) through a polling of at least 2/3 of the members by the Co-Chairs or their designees. All such urgent business and the process by which decisions are reached must be fully and completely documented and submitted to CAPPA at the next regularly scheduled meeting.

Section 8: Meeting Notices

Notices of meetings will be given in a timely fashion, no less than 30 days before a meeting is to be held. Notification of meetings and other information pertaining to CAPPA may be delivered directly to the members by U.S. Mail or by electronic delivery (fax, e-mail, etc.).

Section 9: Quorum

Fifty percent (50%) plus one (1) of all current voting members shall constitute a quorum, and shall be present to vote. Meetings may be conducted and minutes produced of issues discussed with less than a quorum present. The Co-Chairs and/or the Executive Committee may not declare a quorum to conduct business in the absence of less than fifty percent (50%) plus one (1) of all eligible voting members.

In the event there is urgent business to conduct, the Executive Committee may meet at the call of the Co-Chairs to conduct such business. This process may only be used to address administrative problems or to make decisions for CAPPA on an emergency basis and within a time period for which it would not be possible to call a special meeting of CAPPA.

Any decisions made during such an emergency meeting must be ratified by the

membership at the next regularly scheduled meeting. Corrective action(s) must be made

for any decisions not ratified by the membership.

It is the personal responsibility of each voting member to be present and actively

participate in all meetings of CAPPA. It must be assumed that business of CAPPA will be

transacted and decisions made at each regularly scheduled meeting. No recourse will be

allowed for members who feel they were unable to participate in actions taken at meetings

in which they were not present.

Section 10: Alternates and Proxies

CAPPA does not allow a regular voting member to designate an alternate person to attend

meetings and vote in his or her place, and does not allow votes by proxy, either verbally

given or written. A voting member must be present to participate in discussion, debate,

and vote on any issue.

ARTICLE SIX - STANDING COMMITTEES AND TASK FORCES

CAPPA shall have four (4) Standing Committees, and various ad hoc Task Forces as may,

from time to time, be needed. It is required that each voting member of CAPPA serve on

at least one Standing Committee, and no member may serve on more than two Standing

Committees. Work done by each Committee shall be recorded, and those records shall

become a permanent part of the official records of CAPPA, which shall be kept on file with

the Department. The chair of each Standing Committee is responsible for ensuring that

appropriate and accurate minutes are taken and forwarded to the Department on a timely

basis.

Section 1: Executive Committee

The Executive Committee shall be comprised only of the following five (5) members of CAPPA: the Department Co-Chair, the two (2) Community Co-Chairs, and two other active members of CAPPA who have been duly elected by CAPPA as a whole to serve one-year

The Executive Committee shall be responsible for general governance issues concerning CAPPA. This includes the general conduct and decorum of meetings, removal of members, conflicts of interest, travel requests, requests for expense reimbursement, and other routine governance matters. The Executive Committee shall also be responsible for submitting letters of concurrence or non-concurrence for the Department's Applications for federal grant funds, based on the vote of CAPPA membership.

The Executive Committee has the authority to recommend to the entire membership any changes in the composition, number, structure, name, function, or authority of any other Standing Committee. This includes the ability to recommend creation of new or additional Standing Committees, or *ad hoc* Task Forces. CAPPA shall adopt or reject the recommendations of the Executive Committee concerning Standing Committees and Task Forces in accordance with the decision making policies outlined above.

Section 2: Membership Committee

terms on the Executive Committee.

The Membership Committee shall be responsible for the recruitment of new members, review and evaluation of applications for membership, election of applicants to CAPPA, assessing gaps in membership, review of all appropriate data sources to ensure that parity, inclusion, and representation are achieved to the extent possible, ensuring adequate orientation, training and mentoring is provided to new members, review and recommend the removal of a voting member from CAPPA, and conducting exit interviews as members leave CAPPA.

Section 3: Comprehensive Plan and Evaluation Committee

The Comprehensive Plan and Evaluation Committee shall be responsible for providing direction and meaning to the planning process as a whole, and to the operation of the Wyoming Comprehensive Care and Prevention Planning Alliance. This committee shall examine the values, norms, status, and environment and relate those factors to the desired future state of CAPPA. This committee shall also have the ultimate responsibility to ensure that an adequate and accurate Comprehensive Plan is produced by CAPPA. This committee shall also be responsible for ensuring that adequate and accurate needs assessments and community service assessments are conducted on a regular basis, and keeping all CAPPA members informed of those assessments and their impact on the care and prevention issues associated with HIV/AIDS, Hepatitis, and Sexually Transmitted Infections in Wyoming. The Comprehensive Plan and Evaluation Committee shall also have responsibility for prioritizing target populations and reviewing appropriate interventions. At least one member of this Committee must be currently serving as a Community Co-Chair.

Section 4: Advocacy Committee

The Advocacy Committee shall be responsible for the dissemination of general information about CAPPA to the general public, and shall be responsible for conveying to the general public, elected officials, partner organizations and agencies the positions of CAPPA on issues affecting HIV/AIDS/Hepatitis/STI care and prevention in the State of Wyoming. All press releases and other official correspondence of CAPPA shall be subject to final review and approval of the Executive Committee and the Department.

Section 5: Red Ribbon Committee

The Red Ribbon Committee shall be responsible for providing direction to CAPPA and making decisions on matters relating to the medical care and treatment, together with all other aspects of the physical, social, mental, and spiritual well-being, of persons living with HIV/AIDS and/or hepatitis in Wyoming. The Red Ribbon Committee shall also regularly

review and update the AIDS Drug Assistance Program (ADAP) Prescription Drug Formulary.

ARTICLE SEVEN - TRAVEL

Routine in-state travel to and from regularly scheduled meetings and functions of CAPPA need not be approved, and a voting member or task force member may seek reimbursement for his or her non-covered actual expenses incurred.

The Executive Committee shall review all requests of CAPPA members to travel to conferences, seminars, workshops, training, or for attendance at other related matters. Any member wishing to travel shall submit a travel request to the Executive Committee at least six (6) weeks in advance of the desired travel date. The Executive Committee shall provide an approval or denial to the member within two (2) weeks of the receipt of the request. Preference will be given to members in leadership positions, members who have not recently traveled on CAPPA business, and for attendance at functions that have a strong link to the community planning and public advisory input process.

Each member is responsible for making his or her own travel arrangements, including airfare, hotel, and other transportation. The State of Wyoming's official policies concerning travel apply to all travel expenses paid for by the Department. The most economical mode of transportation will be used for all travel. Airline tickets should be purchased as far in advance as possible to aid the state in taking advantage of discounted air fares, and must reflect the lowest economy fare available. Rental cars can only be obtained with prior approval, and at the sole discretion of the Department. The Executive Committee must discuss any travel requests involving rental cars with the Communicable Disease Unit Chief at the Department prior to approval being granted.

It is each member's responsibility to pay for all costs associated with approved travel, which will then be reimbursed to the member upon completion of the travel. Airline tickets purchased in advance of travel can be reimbursed prior to the actual travel. The

Department can not generally pay directly for travel for a member. Department staff can assist members in making travel arrangements if so requested. If financial assistance is needed in making travel arrangements, the Department will review each request on a case by case basis.

Each member who travels on CAPPA business is expected to make a report to the membership at the next regularly scheduled meeting.

ARTICLE EIGHT - YOUTH INVOLVEMENT

Any person under the age of eighteen (18) who wishes to participate in any meeting of CAPPA must be under the supervision of a parent or legal guardian. An Agreement to Participate, Assumption of Risk and Release of Liability for Youth form must be completed and signed by the youth, his or her parent or legal guardian, and a witness, prior to participation in any CAPPA function.

ARTICLE NINE - BOOKS AND RECORDS

CAPPA shall keep minutes of all proceedings of CAPPA, its Standing Committees and Task Forces, and other such books and records as may be required for the proper conduct of its business and affairs. All such books and records shall be kept on file with the Department.

ARTICLE TEN - AMENDMENTS

These Bylaws may be amended at any regular or special meeting of the Wyoming Comprehensive Care and Prevention Planning Alliance. Written notice of all proposed Bylaws changes shall be mailed or otherwise delivered to each voting member at least thirty (30) days prior to the date of the meeting. Bylaws changes require consensus or a majority vote of the entire membership.

ARTICLE ELEVEN - RATIFICATION

The Bylaws will go into effect upon consensus or a majority vote of the CAPPA membership.

ARTICLE TWELVE - DISSOLUTION

The Wyoming Comprehensive Care and Prevention Planning Alliance exists to assist the Wyoming Department of Health in the HIV/AIDS/Hepatitis/STI Community Planning and Public Advisory Input processes. Unless CAPPA elects otherwise, and creates new Bylaws, CAPPA shall remain formed for as long as the Department receives funding for HIV prevention, care, and treatment.